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Date: June 14, 2005

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SUBJECT: Submission of Form SB/81 & SB/96
U.S Patent Application Serial No.09/982,093
Filed: 10/19/2001
Title: Drug Delivery Systems
Inventor: S. Rao Cherukuri
Art Unit: 1615
Examiner: FUBARA, B.
Ref(s): 24222-X3

Sir/Madam:

Here are three forms SB 81, SB 96 and SB 97 faxed for the above case

SNO	Forms Enclosed	No. of Pages
1)	Cover letter	1
2)	Form SB/97	1
3)	Form SB/81	1
4)	Form SB/96	1
	Total No. of Pages	4

Total No of Pages Faxed: 4

By

S.Rao Cherukuri
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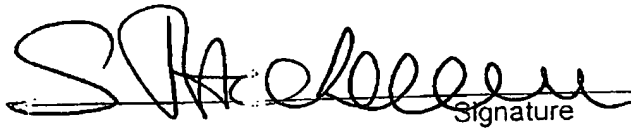
PTO/SB/97 (09-04)

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on June 14, 2005
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S. RAO CHERUKURI

Typed or printed name of person signing Certificate

(301) 696-8520

Registration Number, if applicable

Telephone Number

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Form SB/8
Form SB/9

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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	09/982,093
Filing Date	10/19/2001
First Named Inventor	S. RAO CHERUKURI
Title	Drug Delivery Systems
Art Unit	1615
Examiner Name	FUBARA, B.
Attorney Docket Number	24222-X3

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
PHANESH B. KONERU	40053

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:


OR

<input checked="" type="checkbox"/> Firm or Individual Name	S. RAO CHERUKURI				
Address	6900 English Muffin Way Unit A				
City	Frederick	State	MD	Zip	21703
Country	USA				
Telephone	(301) 696-8520	Fax	(301) 696-1424		

I am the:

☒ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	JUNE 14, 2005
Name	S. RAO CHERUKURI	Telephone	(301) 696-8520
Title and Company	PRESIDENT, CAPRICORN PHARMA INC.		

NOTE: Signatures of all the inventor(s) or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: S. Rao Cherukuri
 Application No./Patent No.: 09/982,093 Filed/Issue Date: 10/19/2001
 Entitled: Drug Delivery Systems (Regular Kortex with pharmaceuticals)

Capricorn Pharma, Inc a Maryland Corporation
 (Name of Assignee) (Type of Assignee: e.g., corporation, partnership, university, government agency, etc.)

states that it is

1. ☒ the assignee of the entire right, title, and interest; or
 2. ☐ an assignee of less than the entire right, title and interest.
 The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012422 Frame 0547, or for which a copy thereof is attached.

OR
 B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.
 (NOTE: A separate copy of a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is specified below) is authorized to act on behalf of the assignee.

S. Rao Cherukuri
 Signature

June 14, 2005
 Date
(301) 696-8520

Printed or Typed Name

Telephone Number

S. Rao Cherukuri
President

Title

This statement is information a return of information required to obtain or retain a benefit by the public which is to be paid by the Secretary, is governed by 35 U.S.C. 122 and 37 CFR 1.101 and 1.114. This collection is estimated to take 10 minutes to complete, including gathering, preparing, reviewing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any fee to complete this form and/or suggestions for reduction of this burden, should be sent to the Chief Information Officer, Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEEDBACK COMPLETED TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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